Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART					I	SMALL ENTITY					OTHER THAN	
			(Column	1)	(Colu	mn 2)		TYPE		OR	SMALL	
то	TAL CLAIMS					100		RATE	FEE]	RATE	FEE
FO	R		NUMBER I	NUMBER FILED		NUMBER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			minus 20= *		*	·		X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	minus 3 = *			=		X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "						column 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	* 13;	Minus	** 2	0	=		X\$ 9=		OR	X\$18=	j
AME	Independent FIRST PRESE	* 4 NTATION OF MI	Minus JLTIPLE DEF	*** PENDEN	7 T CLAIM	= /		X42=		OR	X84=	84.00
							۱ '	+140=	ı	OR	+280=	
							•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		100m.ree	-		, 15511. 1 421	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			+280=	
							L	TOTAL		OR	TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	
	Park Same Care	(Column 1)			mn 2) HEST	(Column 3)	1 .					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		J ∤	445			.000	
*	f the entry in eals	mn 1 is less than t	he entry in colu	ımn 2 writ	e "O" in co	olumn 3		+140=		OR	+280=	
**	If the "Highest Nu If the "Highest Nu	mber Previously P mber Previously P mber Previously Pa nber Previously Pa	aid For" IN THI aid For" IN TH	S SPACE IS SPACE	is less that is less that	an 20, enter "20 an 3, enter "3."	•	TOTAL ADDIT. FEE and in the ap	oropriate bo	OR x in co	TOTAL ADDIT. FEE lumn 1.	

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR		R THAN ENTITY
FOR		NUMBE	NUMBER FILED		NUMBER EXTRA			RATE	FEE		RATE	FEE
BASI	C FEE				\$ 16 m				395.00	OR		790.00
TOTA	L CLAIMS	g	minus 20 =			*				OR	x\$22=	
INDEPENDENT CLAIMS 2 minus 3 = *							x41=		OR	x82=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							Į.	TOTAL		OR	TOTAL	190.00
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							ā _	SMALL ENTITY			OTHER THAN SMALL ENTITY	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		NU PRE	GHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 9	Minus	**~	0	=		x\$11=		OR	x\$22=	
	Independent	* 2	Minus	*** /	3	=		x41=		OR	X82=	
&	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	·
(Column 1) (Column 2) (Column 3)							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	7
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NU PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		x\$11=		OR	x\$22=	
	Independent	*	Minus	***		=		x4 1 =		OR	x82=	
≪	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
(Column 1) (Column 2) (Column 3)							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NL PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 19	Minus	** ~	20	/11		x\$11=		OR	x\$22=	
	Independent	* 5	Minus	*** ,	3	= 2		x41=		OR	X82=	160,0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=									OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												